and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Pate

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

JUN 1 8 2007

INSTRUCTIONS: This fast should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate All further indicated units collected units collected units collected maintenance fee notificat	frespondence including below or directed other ions.	ng the Patent, advance of herwise in Block I, by (	orders and notification of n (a) specifying a new corres	naintenance fees will be pondence address; and/	e mailed to the current or (b) indicating a sepa	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				e: A certificate of maili s) Transmittal. This cert ers. Each additional papers.	ng can only be used fo tificate cannot be used for er, such as an assignmen	r domestic mailings of the or any other accompanying nt or formal drawing, must	
•	7590 05/03	3/2007	navo	its own certificate of m	alling or transmission.		
Gregory L. Bra Medrad, Inc. One Medrad Dri	dley		I he: State addr trans	Certifica reby certify that this Fee es Postal Service with st essed to the Mail Stor smitted to the USPTO	te of Mailing or Transic(s) Transmittal is being ufficient postage for firs of ISSUE FEE address 17) 273-2885, on the defeated in the defeated	nission deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.	
Indianola, PA 15	051			usan M. M.	<del>/                                    </del>	\ (Depositor's name)	
/19/2007 HDEMESS2 0	0000094 10622242		<del>  </del>	VIVIIII	7//	(Signature)	
FC:1501 1400.00 DP FC:1504 300.00 DP			/ [	June 25, 20	007	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATT	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/622,242	07/18/2003		Michael G. Frazier		VI/99-024.D	3127	
FITLE OF INVENTION: COMMUNICATION SYSTEMS FOR USE WITH MAGNETIC RESONANCE IMAGING SYSTEMS							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	08/03/2007	
EXAMINER ART UNIT			CLASS-SUBCLASS				
KISH, JAMES M 3737			600-420000				
<ul> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attornation.	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 James Stevenson  Gregory Bradley  3			
B. ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	oc)			
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
MEDRAD, Inc. Indianola, PA							
Please check the appropri	ate assignee category or	r categories (will not be p	orinted on the patent):	Individual Corpora	ation or other private gro	up entity Government	
Ala. The following fee(s) are submitted:    State   St			b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity Stat	us (from status indicate	d above)				<del></del>	
a. Applicant claims	SMALL ENTITY state	us. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL El	NTITY status. Sec 37 CI	FR 1.27(g)(2).	
NOTE: The Issue Fee and nterest as shown by the r	Publication Fee (if req ecords of the United Sta	uired) will not be accepted by Patent and Trademark	ed from anyone other than the Office.	he applicant; a registered	d attorney or agent; or th	e assignee or other party in	
Authorized Signature	Han lot	In-	•	Date June	e 15, 2007		
Typed or printed name				Registration No	38,755		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete							

this form and/or suggestions for reducing this burden, should be sort to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.